

The President's Emergency Plan for AIDS Relief (PEPFAR)—"Saving Lives: Biomedical and Traditional Healing Collaboration on HIV/AIDS"

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Traditional, Complementary and Alternative Medicine at NRMSM

- African Health Care Systems (AHCS),
- Indian Systems of Medicine (ISM—Ayurveda, Sowa Rigpa, Unani-Tibb, Siddha),
- Chinese Systems of Medicine (Traditional Chinese Medicine, Japanese etc.),
- and other traditional, complementary and alternative systems—eg. Homeopathy, homotoxicology, energy medicines, etc.
- Dept. Family Medicine lectures to undergraduate and graduate medical students; various research initiatives under development

African Health Care Systems Research Network (Faculty Approved)

- 80% of South Africans see TH's
- Estimated 200,000 TH's in RSA
- AHCS Headed by Dr. Nceba Gqaleni, Deputy Dean
- MOU signed October 2003 between NRMSM and 1)
 KZN Traditional Healers Council incl. Ethekwini THC,
 2) Mwelela Kweliphesheya,
- 3) Umgogodla Wesizwe Trust
- HIV/AIDS Task Team from 11 KZN Health Districts Established
- Two US State Dept. Funded Workshops (very fruitful discussions)

1st Major AHCS Project: PEPFAR Funding Approval for "Saving Lives: Biomedical and Traditional Healing Collaboration on HIV/AIDS"

- Pilot Program -- Focus on Ethekwini District
- Train and Equip 250 TH's in Year 1in 5 One-Week
 Workshops (Ethekwini has perhaps 10,000, of whom over 2000 are currently registered with the TH Council0
- Participating TH's Must be:
 - Nominated by Ethekwini TH Council
 - Registered with KZN TH Council
 - Trained in HIV/AIDS Awareness
 - Trained in VCT/HBC
 - Trained in ARV Awareness
- Posting of Trained TH's at Four Global Fund Workplace Clinics

Project Components (1)

- Joint HIV/AIDS Clinical Guideline Development, using
 - Family Medicine Guidelines (lots of similarities with TH approach)
 - Ethekwini Health Guidelines
 - KZN DOH Guidelines
 - New formalization of TH Practices (informal, unwritten guidelines exist)
 - Focus groups, mock consultations, collaboration between professionals

Project Components (2)

- 2-Way Referral System Development
 - Informal system already exists, largely one-direction (from TH's to Clinics)
 - Patients move back and forth, particularly seeking "alternative" diagnosis when testing positive for HIV
 - Trad. Healers already send referral letters to clinics
 - Trad. Healers asking for at least basic information back from biomedical team: what were patients given in terms of treatment
 - Trad. Healers can make big impact on patient compliance and OI management with good collaboration from biomedical
 - Confidentiality issues must be clarified
 - Close Collaboration with DoH teams under development

Project Components (3)

- Medical Kit Supply
 - Most TH's practice in resource constrained settings
 - See on average 5 HIV+ patients a day
 - Most lack even rubber gloves
 - Plan to supply modified version of KZN DOH Home-based Care Kit (included in Project Budget)

Project Components (4)

- Introduction of Record Keeping Systems
 - Underlies success of entire project;
 - Brand new concept to most traditional healers
 - Issues of literacy—requirement for pictograms and check boxes, may experiment with tape recording as well
 - Should deeply and broadly improve our understanding of traditional healer practices
 - Should dramatically improve the chances of success for the long term collaboration between practitioners of the two systems
 - Already agreed to and advocated by the Trad. Healer Councils

Project Components (5)

- VCT Strategy Development
 - Healers are expert counselors
 - Already involved in pre- and post-test counseling
 - Already involved in issues of patient compliance
 - Have themselves raised the issues of potential interactions between ARV's and muthis
 - Are not currently allowed to legally test in South Africa (though other countries in Africa permit lay people to test)
 - Medical School team is working on this issue

Project Components (6)

- Development of More Effective Prevention Messages and Behavioral Counseling
 - Patients listen well to what healers tell them (part of culture, divination effects, "seeing" patient condition without being told, etc)
 - Healers affirm they can work together with us to develop more effective behavior change strategies
 - Many cultural issues involved because of traditional African beliefs in spells, etc.
 - Healers available 24 hours a day—real old style family doctors, community doctors

Project Components (6)

- Healers have to help the patients while they are on the waiting list for ART
- Healers give the patients herbal remedies to boost their immune system
- Healers advise patients on good nutrition
- Advice on Positive Living:
 - behavior change
 - Stop using drugs
 - Stick to one partner
 - Use condoms
- Good herbal remedies for:
- Boosting immune system
- Appetite stimulation leading to weight gain
- Some patients are able to return to work
- Oral thrush
- Skin rashes
- STI's
- Diarrheoa



December 15, 2004: Amb. Fraser (US State Dept.), Mr. Makahtini (Mwelela and NRMSM), Dr. Hartzell (NRMSM), Makhosi Ntuli (KZN THC), Makhosi Bhengu (KZN & Ethekwini THC), Makhosi Nkomo (Ethekwini THC), Amb. Tobias (PEPFAR)

